# Montana Medicaid

# CLAIM JUMPER

## In This Issue

## Abortion Form Update

When completing a Medicaid Recipient/Physician Abortion Certification (MA-037), it must be clear whether Section I, II or III is selected.  Please indicate which section is selected by one of the following methods:

• Circle the section number

• Mark the section with an X to the left of the box

Claims without one of these two indicators will be denied.

## CHIP Income Eligibility Guidelines Changing

Eligibility guidelines for the Children's Health Insurance Plan (CHIP) changed Wednesday, February 1, because of a recent change in the federal definition of "poverty."

CHIP provides low-cost health insurance for eligible children up to the age of 19.  The program currently covers about 12,000 Montana kids and has openings for about 2,000 more. The state Department of Public Health and Human Services (DPHHS) administers CHIP.

To be eligible for CHIP, a child's family income must fall at or below 150 percent of the federal poverty guidelines, which are calculated annually using the Consumer Price Index and statistics from the U.S. Census Bureau.  This year's guidelines were released January 24 and implemented by the CHIP program on February 1, 2006.

"Montana families whose children did not qualify for CHIP in recent months because their incomes were a little too high may want to reapply," said Jackie Forba, who manages the CHIP program for DPHHS.

For a family of four, the CHIP income guideline is now $30,000 a year.  This compares to last year's limit of $29,025. CHIP gives credit for some employment-related expenses, so children may be eligible even if their family income is slightly over the income guideline.

"Some working families may not realize that their children qualify for the Children's Health Insurance Plan," Forba said.  "It's a great time to apply or reapply."

For more information about CHIP, call toll-free 1-877-KidsNow, or 1-877-543-7669. In Helena, call 444-6971. More information is also available online at www.chip.mt.gov.

The following table shows CHIP income guidelines.  These figures are effective February 1, 2006.  Income guidelines may be higher after 2006.

### CHIP Income Guidelines
*(Effective February 1, 2006)*

| Family Size (including adults) | Family Annual Income (approximate) |
|---|---|
| 2 | $19,800 |
| 3 | $24,900 |
| 4 | $30,000 |
| 5 | $35,100 |
| 6 | $40,200 |
| 7 | $45,300 |
| 8 | $50,400 |

• Some employment-related deductions apply.

• If a child qualifies for Medicaid, health insurance will be provided by Medicaid.

*Submitted by Michael Mahoney, DPHHS*

## Publications Reminder

It is providers' responsibility to be familiar with Medicaid manuals, fee schedules, and notices for their provider type, as well as other information published in the *Claim Jumper* and on the Medicaid website (mtmedicaid.org).

## Obtaining Disproportionate Share Payment

Hospitals should submit **all** Medicaid inpatient claims, even if the claim is expected to pay at zero. All claims, including those that pay at zero, are used when calculating disproportionate share (DSH) payments. Providers who fail to submit all Medicaid inpatient claims may not be eligible for DSH payment or may not receive full credit for DSH payment.

*Submitted by Thom Warsinski, DPHHS*

## OCR and Institutional Crossovers

When completing a UB-92 claim, it is extremely important that the text be kept within the appropriate boxes and not touching a line. The OCR software can read handwritten or typed claims, as long as the writing is clear and kept within the lines. This is especially important when completing a UB-92 form with deductible and coinsurance information. When entering coinsurance information into form locators 39-41 for value codes, the information must be carefully placed inside the box or it will be read incorrectly by the OCR software. For example, when entering an A2 indicating coinsurance, if the 2 is on or over the line and the coinsurance amount is $30.00, the software will read the amount as $230.00. Also, if the dollar amount extends over the line, the amount that should have been $15.00 will be read as $1.50.

## Paperwork Associated With Electronic Claims

As a reminder, paperwork submitted with electronic claims does not guarantee that the claim will be paid. The claim may deny for many reasons, including problems with paperwork.

Claims often deny because the paperwork is not in order. For example, an electronic claim for a sterilization will deny if the sterilization form does not have the proper signature, exactly as it would if the claim was submitted on paper. If you have questions about submitting paperwork or electronic claims, please contact Provider Relations.

## New Codes for Psychological, Neurobehavioral, and Neuropsychological Testing

Effective January 1, 2006, the American Medical Association deleted CPT codes 96100, 96115, and 96117. Physicians, mid-level practitioners, psychiatrists, psychologists, licensed professional counselors, and schools providing these services to Medicaid clients and individuals eligible for MHSP should now report codes 96101, 96116, and 96118 (see table below for crosswalk). The same provider rate of reimbursement, max units, and required diagnoses that applied to the deleted codes will be applied to these new codes.

| Old Codes | New Codes |
| --- | --- |
| 96100 | 96101 |
| 96115 | 96116 |
| 96117 | 96118 |

## Casualty Recovery Program

The Casualty Recovery Program allows Montana Medicaid to recover funds on claims for Medicaid clients for personal injuries, illness or disability for which Montana Medicaid has paid. These recoveries come from potentially liable third parties. Since providers have direct contact with Medicaid clients, providers are the best source of timely third party resource information. Providers have an obligation to investigate and report the existence of other insurance or liability. Provider cooperation is essential to the functioning of the Medicaid system.

If you received information that a third party is liable for services rendered to a Medicaid client, please contact the Third Party Liability Unit as soon as possible at 1-800-694-3084 or write to:

Quality Assurance Division
Third Party Liability Unit
PO Box 202953
Helena  MT  59620-2953

## Montana Access to Health Web Portal Update

Some new features recently became available on the Montana Access to Health (MATH) Web Portal.

- There are two new buttons available in the *Eligibility Inquiry* option; *Current Client Eligibility* and *New Client Eligibility*. *Current Client Eligibility* allows the user to retain the provider, date of service and client information when doing multiple eligibility inquiries in one session. Providers can change the desired data element without having to enter all of the information again. Select *New Eligibility* to start with a blank inquiry screen. Selecting *Eligibility Inquiry* from the general menu defaults to *New Eligibility*.

- Providers can now verify eligibility using first name, last name and date of birth. Before this change, the middle initial had to be included in order to get a response.

- During previous eligibility inquiries, names with spaces or hyphens were returning an error. This has been corrected to allow name searches for first or last names containing spaces or hyphens.

- The MATH Web Portal pages also have been modified to conform to the new State of Montana color scheme and banner page standards.

## Optometric Update

Effective July 1, 2006, procedure codes 96110 and 96111 will no longer be paid by Medicaid to optometrists. Per CPT-4, these codes are utilized to report services provided for testing of cognitive functions of the central nervous system.

# Recent Publications

The following are brief summaries of recently published Medicaid information and updates. For details and further instructions, download the complete document from www.mtmedicaid.org, the Provider Information website. Select *Resources by Provider Type* for a list of resources specific to your provider type. If you cannot access the information, contact Provider Relations at (800) 624-3958 or (406) 442-1837 in Helena or out-of-state.

| | Recent Publications Available on Website | |
|---|---|---|
| **Date** | **Provider Type** | **Description** |
| **Notices** | | |
| 02/08/06 | Pharmacy | Prior Authorization Requirements for Rozarem® and Lunesta® |
| 02/08/06 | All Provider Types | Team Care Medicaid Program Doubles and Learning to Use Your Doctor Articles Added, Team Care and MEPS Article Deleted |
| 02/10/06 | Hospital Outpatient, RHC, FQHC, IHS, Physician, Mid-Level Practitioner, Optometrist, Ambulatory Surgical Center, Public Health Clinic, Lab and X-Ray | New and Deleted Codes |
| 02/24/06 | RHC, FQHC, Home Health | PASSPORT Required for FQHCs, RHCs and Home Health |
| **Fee Schedules** | | |
| 01/27/06 | Physician, Mid-Level Practitioner, Podiatrist, Public Health Clinic, IDTF, Lab and X-Ray | Updated Fee Schedules |
| 02/02/06 | Physical Therapy, Occupational Therapy, Optometric, Optician, Eyeglasses, Schools, Speech | Updated Fee Schedules |
| 02/21/06 | Oral Surgeon, Personal Transportation, Non-Emergency Transportation, Ambulance, Nutrition, Private Duty Nursing, EPSDT | Updated Fee Schedules |
| **Other Resources** | | |
| 01/23/06 | All Provider Types | What's New on the Site This Week |
| 01/25/06 | All Provider Types | PASSPORT FAQs Updated |
| 01/31/06 | All Provider Types | What's New on the Site This Week |
| 02/01/06 | All Provider Types | March Claim Jumper |
| 02/02/06 | All Provider Types | Updated Carrier Codes |
| 02/03/06 | Pharmacy | Updated PDL and Quicklist |
| 02/03/06 | All Provider Types | Request for Prescription Information or Change Form; Point of Sale Facilitated Enrollment of Dual Beneficiaries; Facilitated Enrollment Q & A; Point of Sale Facilitated Enrollment: Update on NACDS Issues, Wellpoint/CMS |
| 02/07/06 | All Provider Types | What's New on the Site This Week |
| 02/07/06 | All Provider Types | Deleted Definitions of MEPS and VHSP and Added Definition of Montana Access to Health Web Portal |
| 02/08/06 | All Provider Types | Deleted Links to MEPS, e!SOR and VHSP |
| 02/08/06 | All Provider Types | Prior Authorization Request for Rozarem® and Lunesta® Form Added and MEPS Access Request Form Deleted |
| 02/14/06 | All Provider Types | What's New on the Site This Week |
| 02/21/06 | All Provider Types | What's New on the Site This Week |
| 02/22/06 | All Provider Types | "Provider Web Portal" Link in Navigation Bar Changed to "Secure Provider Web Portal" |
| 02/23/06 | All Provider Types | DPHHS Search Page Link Updated |
| 02/24/06 | All Provider Types | Provider Fair 2006 Revised Registration Form and Daily Schedules of Events |

**Montana Medicaid**
**ACS**
**P.O. Box 8000**
**Helena, MT  59604**

# Key Contacts

**Provider Information website:  http://www.mtmedicaid.org**
**ACS EDI Gateway website:  http://www.acs-gcro.com**
**ACS EDI Help Desk  (800) 624-3958**
**Provider Relations**
    **(800) 624-3958 (In and out-of-state)**
    **(406) 442-1837 (Helena)**
    **(406) 442-4402 Fax**
    **Email: MTPRHelpdesk@ACS-inc.com**
**TPL**    **(800) 624-3958 (In and out-of-state)**
    **(406) 443-1365 (Helena)**
    **(406) 442-0357 Fax**
**Direct Deposit Arrangements (406) 444-5283**
**Verify Client Eligibility**
    **FAXBACK (800) 714-0075**
    **Automated Voice Response (AVR) (800) 714-0060**
    **Point-of-Sale Help Desk for Pharmacy Claims (800) 365-4944**
**PASSPORT (800) 624-3958**
**Prior Authorization**
    **DMEPOS (406) 444-0190**
    **Mountain-Pacific Quality Health Foundation (800) 262-1545**
    **First Health (800) 770-3084**
    **Transportation (800) 292-7114**
    **Prescriptions (800) 395-7961**

**Provider Relations**
**P.O. Box 4936**
**Helena, MT  59604**

**Claims Processing**
**P.O. Box 8000**
**Helena, MT  59604**

**Third Party Liability**
**P.O. Box 5838**
**Helena, MT  59604**